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To: Ms. Christopher D. Koharski From: Deanna J. Shirley  
Co: USPTO, Art Unit 3763 Phone: (707) 953-9887  
Fax: (571) 273-8300 Fax: (707) 571-8700  
Phone: (571) 272-7230 Date: 05/08/2007  
Re: 10/608,862 No. of pages including cover: 12  
☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply

Amendment after Final Office Action mailed 3/8/2007 follows.

Please do not hesitate to contact me if anything further is required.

Thank you,

Deanna J. Shirley, Reg. No. 39,026

I hereby certify under 37 CFR 1.8 that this Amendment and all supporting papers is being transmitted by facsimile or by U.S. Mail First Class with sufficient postage to the United States Patent and Trademark Office, Office of Initial Patent Examination, Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria Virginia, 22313-1450 on the date specified below.

Margaret A. Brothers  
Margaret A. Brothers

5/8/2007  
Date

PTO/SB/21 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

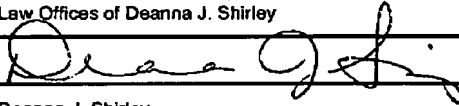
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/608,862	
	Filing Date	05/27/2003	
	First Named Inventor	M. Bret Schneider	
	Art Unit	3763	
	Examiner Name	Koharski, Christopher	
Total Number of Pages in This Submission	12	Attorney Docket Number	Telecath

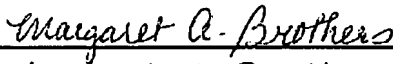
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ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Law Offices of Deanna J. Shirley		
Signature			
Printed name	Deanna J. Shirley		
Date	05/08/2007	Reg. No.	39028

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Margaret A. Brothers	Date	5/8/2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	)	Art Unit: 3763
	)	
Schneider <i>et al.</i>	)	Examiner: Christopher Koharski
	)	
App. No. 10/608,862	)	Attorney Docket: Telecath
	)	
Filed: June 27, 2003	)	Date: May 8, 2007
	)	
Computer Assisted Manipulation of	)	
Catheters and Guide Wires	)	

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Amendment and Request for Reconsideration**

Sir:

In reply to the Office Action mailed **March 8, 2007**, making the Office Action final and setting a shortened statutory period set to expire three (3) months from the date of mailing, Applicants submit the following Amendment and Request for Reconsideration. Applicants respectfully request that the following amendments be entered and the application be reconsidered and placed in condition for allowance.

A complete claims listing begins on page 2.